

QUESTIONS AND ANSWERS
RFP # 13-012-31
INMATE MEDICAL SERVICES
DUE FEBRUARY 22, 2013

We are interested in the BID RFP # 13-012-31 for the Inmate Medical Services for Shelby County Government. I hope you can assist me or point me the right direction. I wanted to some information on the current contract on these services. Is this contract currently through a private company or is the Sheriff running it? Where could I get a copy of the current contract? Please call me with any questions at the number below or at this email.

Our current contract is with a private company. To review the current contract, please e-mail Edna Ward at edna.ward@shelbycountyttn.gov and ask to review contract number CA134468.

I would like clarification regarding Solicitation #13-012-31 for Inmate Medical Services; I wanted to know if "Partial Bids" (specifically nursing) are allowed vs. bidding on all modalities as requested in the RFP?

Shelby County Government reserves the right to split awards. All proposals must be submitted in a manner that Shelby County Government can "pick and choose" or split an award. All Jail/Jail East facilities will be awarded to a Provider, all Correctional facilities will be awarded to a Provider, and all Juvenile Court facilities will be awarded to a Provider, or all facilities will be awarded to a single Provider.

It is not, however, our intention to split individual services to be provided within the purview of inmate medical care. In other words, I do not envision entertaining a bid for nursing to be provided by company A and a medical doctor or psychiatrist is provided by company B.

I wanted to ask a question pertaining to the resent RFP release for Shelby County TN.

On page 33 section 10 Medical Records it states that **Provider agrees to utilize any electronic medical records system owned or acquired by the County.**

My question is:

What electronic medical record system is the county currently using and would the county be willing to look at other systems that could be provided by a vendor?

We have our own EHR system at NaphCare which is currently being used at all of our facilities (including Orange County CA and Maricopa Co AZ) and we would only consider bidding if we are allowed to use our system if selected.

Pease advise if this is an option.

We are currently using NextGen, and the County is not open to using a vendor provided EMR system as a primary. Furthermore, we expect the provider to bear any cost for interfaces between the County system and the Vendor system.

I had a quick question regarding this RFP. Are companies able to bid on the specific facilities, or do they have to bid on all of them?

For example, if we were interested in providing services to JCMSC only, could we bid on just that facility?

Yes you can bid on single specific facilities.

In regards to the minimum qualifications, would these still need to be met, if only bidding on the Juvenile facility? For instance

Also, do the same scope of services apply to the Juvenile facility, such as cost of meds and supplies are the responsibility of the provider?

Yes you can bid on a single specific facility.

1. Please provide a breakdown of the last two years of costs for the healthcare program for the kids housed at the JCMSC Detention Center? As this may lead the bidder to make a bid "within range" as opposed to making a bid based on the needs of the service, I don't wish to provide.
2. Please provide a copy of the current physician contract who provides the current services to the kids at the JCMSC Detention Center? I don't feel this would be relevant to the services we are requesting , since we have changed the amount of required coverage.(I have heard that a couple of the vendors are talking with our current provider and trying to maybe hire him to help with their services). If you think this is a document that we should provide Ms. Malone would have to release it.

3. Who is providing on-site mental health counseling for the children at the JCMSC Detention Center and how frequently does this occur? **The children don't receive mental health counseling under our current structure. This is an area that we must comply with as per our DOJ MOA.**
4. How many psychiatry hours are currently provided each week for the kids at the JCMSC Detention Center? **ZERO**
5. Who is currently administering the MAISY II test for the new admissions at the JCMSC Detention Center? **It is not being administered during the new admission process currently. This is also a change we are making as per our DOJ MOA.**
6. Is Youth Villages compensated for any of the services being provided to the youths at the JCMSC Detention Center? **No, their services are provided for Crisis assessment through a State contract.**
7. Please provide any available statistics for the number of kids sent to Youth Villages for either counseling or crisis management over the last year. **The only statistics that we have here would be the number of times we called for a Crisis assessment for children who expressed suicidal intent. 2011: 74 2012: 77**
8. Are new admissions accepted 7 days a week at JCMSC Detention Center? **Yes/ 24/7**
9. How many new admissions each year at the JCMSC Detention Center (not including those that immediately leave)?

2012: 1610 male	415 female	2025 total
2011: 2109 male	524 female	2633 total
2010: 2583 male	708 female	3291 total

10. It was mentioned the JCMSC Detention Center was hoping to implement Nextgen at some point in the future, should we assume these costs would be absorbed by the County / Judicial Court / Health Department? **Costs for the implementation of Nextgen will be absorbed by Shelby County Government.**
11. Please provide any statistics available on sick calls or patient encounters for the JCMSC Detention Center? **We have only recently begun tracking the number of children who requested sick call. Sick Call request: Oct 2012=41 Nov 2012=81 Dec 2012=74**

The number of 15-day medical exams required is as follows: 2011=368 2012=501

12. The Jericho Program creates significantly more discharge medication costs than what is typically seen in similar sized jail facilities. Please confirm it is the intent of the RFP

that the successful vendor will absorb these costs? **Confirmed.** It is the intent of the RFP that the successful bidder will absorb these costs.

13. Please confirm that the staffing plans provided are just suggestions as they include significantly less staffing, in many areas, than is currently being provided (e.g. at CJC-6.0 less MA's and 2.0 less Masters MH Professionals)? **Confirmed.** The staffing plan in the RFP is just a suggestion. We wish to hear from each individual bidder what their opinion of a proper staffing plan would be. That is why the language re: an alternate bid is in the RFP.
14. Please confirm it is the intent of the RFP to have at least one RN at intake 24/7 as the 'possible staffing plan' provided only lists 3.0 Intake RN's versus the 4.2 necessary for 24/7 coverage? **Confirmed.** It is the intent of the RFP to have at least one RN 24/7 at intake.
15. Please confirm the vendor has no financial responsibility for the Nextgen software? **The vendor has no financial responsibility for the Nextgen software.**
16. Please confirm that all "Minimum Proposer Requirements" are necessary to bid with the exception of #16 which is not required for RFP submittals but is necessary prior to contract start (with compliance timeline included in the RFP)? **Confirmed.** All Minimum Proposer Requirements are necessary to bid with the exception of #16, which is not required for RFP submittals but is necessary prior to contract start.
17. Please confirm that medications associated with a hemophiliac patient housed at either the Jail or SCCC are the responsibility of the vendor? **Not confirmed.** The Provider is expected to pay for medications associated with a hemophiliac patient housed at either the Jail or SCDCC.
18. From a healthcare standpoint, the Shelby County Corrections Center is currently not accredited nor staffed for accreditation. Please confirm the intent of the RFP is to provide a staffing plan and program to meet ACA standards? **Confirmed.** It is the intent of the RFP to provide a staffing plan and program to meet ACA standards.
19. Has a budget adjustment been approved for the next fiscal year associated with the increased services being asked for at the SCCC? **No.** If yes, is the new budget amount available?

I am inquiring as to when answers to questions for *RFP #13-012-31, Inmate Medical Services for Shelby County Government* will be posted on the County's website for all potential vendors to review. Any information as to when they will be available would be greatly appreciated.

Also, will the County consider an extension on the due date for this proposal as the answers are coming out later than stated in the RFP?

Questions and answers will be posted within forty-eight hours of the bid opening. The bid opens at 4:00 PM, Thursday, January 31, 2013, so we have until 4:00 PM, Tuesday, January 29, 2013 to post questions and answers.

An extension of the due date is not required at this time because we are not late with the questions and answers.

When can we expect answers to questions to be posted on the website? Should we expect an addendum?

We have extended our due date until 4:00 PM, Friday, February 8, 2013 and all questions and answers will be posted to our web site by Friday, February 1, 2013.

RFP Section 6.h on Page 9 of the RFP states "The County encourages the utilization of locally-owned small businesses as sources of subcontract work." However Section 6.h.vi states "Failure by a supplier or contractor to include locally owned small business subcontractors or suppliers in its bid or contract may be grounds for rejection of said bid..." This only applies if we have a mandatory LOSB participation goal in the bid.

1.
 - a. Please provide more detail on exactly what (if any) the mandatory percentage of Locally Owned Small Business (LOSB) participation is for this contract. There are no mandatory LOSB participation requirements in this bid.
 - b. Clarify how each bidder's percentage of LOSB participation will be factored into the scoring of bids. LOSB vendors are given a preference, please see page ten (10) of the bid documents, item number ix.
2. In several places in the RFP (pages 31, 41, and 52) the County states "When hospitalization of an inmate is not required, but the care for the inmate would not be appropriately provided within the housing units for the general population at the Jail facility, a medical housing unit will have to be operated by the provider." This implies that the Jail, SCDOC, and JCMSC do not maintain permanent medical housing units.
 - a. Please confirm whether or not the Jail, SCDOC, and JCMSC maintain permanent medical housing units. None

- b. If they do not maintain such units, how do the County and the current vendor deal with the staffing fluctuations when a medical housing unit is/is not in use, e.g., agency staffing, overtime, etc? **N/A**
- c. Please clarify what the County means by the term “include that both **separately and jointly** as part of the bid.” **We meant to say that we would like to have the bid reflect separately the cost of maintaining such a unit, but to also include that separate cost in the overall bid response.**

RFP Section IX.C.13; pg 33 - In more than one place in the RFP the County refers to “health education services for the **provider's staff**” (page 33) and “health promotion services for the **provider's staff**...including health education, therapeutic diets (as indicated), benefits of physical activity, meeting of personal hygiene needs, and tobacco prevention” (page 54). Typically, these types of services are for the inmates, not for the provider's staff. Please confirm that the hygiene, smoking cessation, and other health promotion services required in the Shelby County RFP are for inmates, not for health care staff members. **County Confirmed. Those aforementioned services required in the RFP are for inmates/detainees.**

3. RFP IX.D.11; pg 28 - With regard to the “Institutional Pharmacy, fully licensed by the Tennessee State Board of Pharmacy on-site at the SCDOC” referenced on Page 44 of the RFP:
 - a. Does the County or the incumbent vendor have an existing Tennessee State Board of Pharmacy license for such an onsite pharmacy?
 - b. Does space for this onsite pharmacy currently physically exist?
 - c. Is the pharmacy currently operating?
 - d. Exactly where is the current onsite pharmacy located within the SCDOC?
 - e. By position, what is the current staffing complement of the onsite pharmacy? Please provide rates of pay and benefits for each position.
 - f. Please identify (and provide contact information for) the pharmaceutical wholesaler that currently supplies inventory to the onsite pharmacy.
 - g. How will existing drug inventory in the onsite pharmacy be handled at the time of contract transition, i.e., will the incoming Provider be required to purchase existing inventory as of the contract start date?
 - h. Please provide an inventory of equipment (automated and manual) currently in use at the onsite pharmacy and identify which items will be available for use by the selected Provider. If available, please include make, model, age, condition, and current maintenance agreement cost.
 - i. Please provide copies of the policies and procedures currently in place for the management of the onsite pharmacy.

N/A – As stated in the RFP, “The successful provider shall operate and maintain an Institutional Pharmacy, fully licensed by the Tennessee State Board of Pharmacy on-site at the SCDOC or otherwise provide a method of insuring provision of all prescription medications in a timely manner to inmates in a legal manner.”
4. RFP Section IX. D #12; pg 48 - Please provide the definition of “Code White,” as referenced on Page 48 of the RFP. **Medical Emergency**

5. RFP Section IX.E.8; pg 53 - Please provide more detail on “Cawthon,” as referenced on Page 53 of the RFP. Cawthon Clinic is a public health clinic operated by the Shelby County Health Department that provides pediatric dental services. It is the County’s intention that Juvenile detainees will be transported by the Court to Cawthon Clinic for required dental care.
6. With regard to the requirement on Page 5 of the RFP that the bidder must “Possess a TennCare Provider number and be credentialed by TennCare MCO’s if responding for the Juvenile component of the RFP”:
 - a. Please describe how the payment flow would work if the County contracts with a TennCare Provider; do you expect the Provider to bill Medicaid directly, rather than receiving payment from the County? Provider shall bill TNCare directly for services provided to TennCare recipients.
 - b. Please explain the County’s rationale for including this requirement in the RFP, as it prohibits many potential bidders from participating, thus restricting competition and resulting in a less price-competitive contract. It is not the County’s intent to pay for health services covered by health insurance
 - c. Will the County consider removing this requirement from the RFP, as it creates an unfair disadvantage to bidders who wish to pursue a single contract comprised of the Jail, the SCDOC, and the JCMSC. No
7. Is an electronic medical record currently being used by Shelby County? Yes. If yes, please answer the following questions.
 - a. What type of EMR? Nextgen
 - b. Is the current EMR being used at all of Shelby County’s facilities? All Jail and Correctional facilities. Anticipate adding JCMSC in 2013.
 - c. Where is the EMR hosted? Shelby County Information Technology department.
 - d. Does the existing EMR have any interfaces with other systems (e.g., Lab, pharmacy, etc.)? Yes.If so, please identify the current interfaces. Bioreference, LabCorp, JMS, IMS
 - e. Other than paying for any new interfaces, does the selected contracted have any financial responsibility with respect to the County’s EMR solution? Other than equipment/software damaged from the actions of the vendor (not including normal wear and tear), No.
8. For the telepsychiatry currently being utilized at the Correctional Center, please provide the following information. Vendor specific, not initiated by the County.
 - a. Utilization statistics
 - b. A complete inventory of equipment being used.
 - c. Will the existing equipment be made available for the selected contractor?

RFP Section VI.i; pg 11 – The RFP requires that proposers utilize a Living Wage for all employees and subcontractors. Upon review of Ordinance #328, it is stated on page 2 (Section 12-115.a) that “the Living Wage rate shall be modified annually as of July 1 to incorporate the adjustments, if any, made to the federal poverty level income.” Upon further review of the Ordinance document, it does provide the living wage rates from 2007, but does not include any updated information. Please provide the current living wage rate that all proposers are to use for Shelby County. One hundred and four percent of the federal poverty level for a family of four with health benefits, divided by 52 weeks per year x 40 hours of work per week. In 2007 the wage level equals \$10.02 per hour. One hundred and twenty percent of the federal poverty level for a family of four without medical benefits, divided by 52 weeks per year x 40 hours of work per week.

1. Please provide a copy of the current health services contract for the all of the Shelby County facilities including any exhibits, attachments, and amendments. Please e-mail Edna Ward at edna.ward@shelbycountyttn.gov and ask to review contract number CA134468.
2. Please provide (by year) the amounts and reasons for any paybacks, credits, and/or liquidated damages the County has assessed against the incumbent vendor over the term of the current contract. Decline to report, as this information may result in a prospective vendor adjusting their bid. The important thing is that we expect adherence to NCCHC, ACA, DOJ standards, etc., as stated in the RFP.
3. Please provide two (2) years' worth of historical data describing the inmate population, broken down by gender. See attached document – Jail Average Daily Population

What is the average length of stay (ALOS) at the Jail and Jail East? ALOS in days for 2012.

Jail (Males) - 17.6 days

Jail East (Females) - 6.3 days

Jail East (Juveniles) - 75 days

4. Please provide a listing of the current health service vacancies by position for each of the Shelby County facilities.

CJC – 2.0 RNs; 6.0 LPNs;

Jail East- 0.0

SCDOC – 2.4 RNs; 4.6 LPNs; Vendor is using PRN and overtime to fill openings.

JCMSC – Not available.

5. RFP Section XI.C.3 - Per page 75 of the RFP, please provide current wage/pay/reimbursement/seniority rates for incumbent health service staff at each of the Shelby County facilities. This should not have been stated. The prospective vendor is expected to be able to determine market rates for labor for the services requested. – (Same as Corizon page 8, next to last question)
6. Please indicate (a) the age and (b) the source of this salary/rate information, e.g., County records, data from incumbent vendor, etc. See response to 5. above

7. RFP Section IX.D; pg 46 & 47 - We have reviewed the staffing information for the Correctional Center and appreciate all of the information provided. While the County provided many positions with the number of FTEs per shift, we noted that a few positions did not detail the FTEs per shift. Are the following positions currently staffed for: a) evenings; and/or b) nights?
 - a. RN Supervisor - **Yes**
 - b. Medical Assistant - **No**
 - c. Medication Manager - **NO**
8. RFP Section IX. D; pg 46 - The RFP lists a Psychologist in the staffing plan for the Correctional Center. Does the County require the position to be a master's level or doctorate level Psychologist? **Doctorate**
9. RFP Section IX.B.1.c; pg 20 - With regard to the 158-bed mental health unit at the Correctional Center:
 - a. Are these beds/inmates included in the population band numbers on page 75? **Yes.**
 - b. We do not see sufficient staff in the staffing plan on page 46 to meet the needs of this unit. Please confirm that the incoming vendor will not be required to provide any services for the patients in this unit. **Incoming vendor will be required to provide mental health services. As requested at the mandatory pre-bid conference, if the vendor's professional experience would suggest an alternative plan would be more effective, it is expected to be submitted for bid.**
 - c. If the vendor will be required to provide services for this unit, please provide the unit's current staffing plan and schedule. **Incoming vendor will be required to provide mental health services. As requested at the mandatory pre-bid conference, if the vendor's professional experience would suggest an alternative plan would be more effective, it is expected to be submitted for bid.**
 - d. **What types of special programming are currently provided in this unit, e.g., anger management, anxiety therapy, step-down programming, etc. Including, but not limited to, Anger Management, MRT (moral reconnection treatment), Sex Offender group, AA, Living Skills group, Bible Study, Parenthood, and GED classes.**
10. RFP Section IX.B.2.h; pg 22 - The RFP requires that "proposals must provide the name and resumes of onsite management staff (Administrator, Director of Nursing, Medical Director). Correctional health care contractors do not typically recruit, hire, or otherwise engage site-level management staff prior to a definite contract award. Because they intend to assimilate incumbent staff, most non-incumbent proposers do not maintain large pools of unassigned personnel to take over new contracts. It is very likely that the incoming Contractor will retain the vast majority of incumbent personnel. In fact, for the reasons outlined below, it is standard practice for an incoming contractor to retain as many of the incumbent staff as possible, assuming they meet all clinical requirements and remain acceptable to the client.

At minimum, all proposers should be required to provide the current job descriptions, MAQs such as education and experience required for each position of leadership.

- Arbitrary replacement of qualified incumbent staff serves no purpose.
- Retention of qualified incumbent staff eliminates disruption of services.
- Retention of qualified incumbent staff promotes retention and morale.
- Retention of qualified incumbent staff ensures continuity of care.
- Incumbent staff members are knowledgeable of client policies and procedures.
- Incumbent staff members already have security clearances.

Furthermore, requiring the names and resumes of site-level staff prior to contract award provides a significant and distinct advantage to the incumbent contractor — the only one who could possibly meet this requirement.

Therefore, will Shelby County consider modifying the specifications of RFP Section IX.B.2.h (which currently requires resumes) to require only general position descriptions rather than naming specific individuals that non-incumbent bidders could not possibly identify prior to contract award? We understand that if the vendor does not have the position filled, the vendor can't be expected to provide the information, so a general description would be acceptable. However, there are individuals of leadership with the company who may not be on site, but would oversee the site's operations (Regional Manager of Operations, or Chief Financial Officer, for example). We would appreciate providing those credentials for consideration.

11. Please provide the capacity and average daily population of each of the Shelby County facilities segregation units.

SCDOC – Building J & E (men) – Capacity 198 each, 396 total

Building (women) – Capacity 12

CJC – Pods A-E – Capacity 154 total, average daily use approx. 51%

Jail East – Pod F (women) – Capacity 5, average daily use approx. 80%

Jail East – Pod C (juveniles) – Capacity 5, average daily use approx. 80%

JCMSC – N/A

12. Please provide an inventory of office equipment (e.g., PCs, printers, fax machines, copiers) currently in use at each Shelby County facility and identify which equipment will be available for use by the selected provider. The necessary equipment has been provided by The County. The County will ultimately determine if any additional equipment is necessary.

13. Please confirm that the time health services staff members spend in orientation, in-service training, and continuing education classes will count toward the hours required by the contract. For routine in-service training, yes. However, for professional certifications, development, and continuing education classes that are necessary for a nurse or doctor to maintain their professional standing, no. At no time will we accept a post not being covered by medical personnel.

14. Please provide an inventory of medical equipment (e.g., blood pressure cuffs, ultrasound, x-ray machines, etc.) currently in use at each Shelby County facility and identify which equipment will be available for use by the selected provider. The necessary equipment has been provided by The County. The County will ultimately determine if any additional equipment is necessary. However, normal medical supplies and non-capital equipment (i.e., items that cost less than \$5,000) are to be provided by the Vendor.

15. How does the health unit staff at each Shelby County facility currently access the Internet: through a facility network or through connectivity provided by the incumbent Contractor? Facility Network Who is financially responsible for such Internet access? The County

16. It was noted during the Pre-Proposal Conference that telepsychiatry is currently used at the Correctional Center. Who is financially responsible for telemedicine connectivity? Vendor Responsibility

17. Please identify the current sub-contracted provider(s) of laboratory services.

- CJC & Jail East – The Med and The Shelby County Health Department; (SCHD)
- SCDOC – The MED and an outside vendor.
- JCMSC – N/A

18. How are radiology services currently provided for all Shelby County facilities: (a) onsite, with permanent County-owned equipment; (b) onsite, by a mobile radiology vendor (PLEASE IDENTIFY VENDOR); or (c) offsite?

(A) **CJC** – TB x-rays performed by The Shelby County Health Department;

(B) **Jail East** – Outside Vendor or at The Shelby County Health Department; **SCDOC** – Outside Vendor.

(C) **CJC, Jail East and SCDOC** - The MED

(C) **JCMSC** - offsite

19. RFP Section IX.C - We understand that The MED is used often for care and pharmaceuticals (as mentioned on RFP pg 32 & 33), but please confirm the designated emergency or "911" hospitals for each Shelby County facility.

CJC, Jail East, SCDOC - The MED. **JCMSC** – The Med and Lebonheur. Should the emergency be at a level that a change of course is indeed required, it will be the decision for members of the 911- emergency crew to initiate.

20. Please identify any specialty clinics currently conducted onsite at each facility, and indicate how many hours per week each clinic is held at said facility.

CJC, Jail East, and SCDOC have Chronic Care provided by the vendor. Additionally, **CJC** has a TB clinic sponsored by the SCHD that visits every Wednesday for 3-4 hours.

JCMSC – Packer Clinic (STD services), a satellite clinic of the Shelby County Health Department. Shelby County Health Department provides STD services (testing and treatment) 5 days per week on-site at the Juvenile Detention Center.

21. We understand that mental health services are provided throughout the Shelby County facilities and there are mental health units. Please confirm the number of beds assigned to mental health patients in Jail and Juvenile units.

CJC- Beds are not assigned however currently there are 438 on mental health meds;

Jail East - Beds are not assigned however currently there are 84 on mental health meds;

SCDOC – Total beds = 179 (155 for males, 24 for females)

JCMSC - none

22. On average, how many inmates are housed in each of the mental health unit on a daily basis?

CJC- 125

Jail East – 21

SCDOC – 164 (140 Males, 24 females)

JCMSC - none

23. Please provide the following information about medication administration.

- a. Who administers medications, e.g., RNs, LPNs, medical assistants?

LPNs and RNs if needed.

- b. How are medications distributed, i.e., pill line or med pass?

SCDOC – AOC, Women's, N-Building, and Main provide a pill line; **Jail East** – Med pass;

CJC- Both Med pass and pill line (Diabetics are normally pill line only).

- c. Where does medication distribution take place, i.e., do medication carts go to the housing units or do inmates come to the medical units? **Both**

- d. How often is medication distributed each day? **As needed; once, twice, or three times per day.**

- e. How long does it take to perform the average medication distribution process? **As you are aware in any facility this varies because of normal jail correctional activities of codes, stop movement, and location of the medication pass.**

24. Please confirm the number of medication carts each Shelby County facility will make available for the use of the incoming vendor.

SCDOC – AOC-3; Womens – 2; Main – 9

Jail East – 2

CJC- 10

JCMSC - 1

25. Please provide copies of the following documents. **This information is vendor specific and will not be provided.**

- a. The formulary currently in use at each Shelby County facility
- b. A current formulary management report

26. On average, what percentage of Shelby County inmates/detainees are prescribed psychotropic drugs each month? **SCDOC** – 21.3% **Jail East** – 48% ; **CJC** – 19.8%; **JCMSC** – Not Available

27. Upon review of the sample contract, it does not delineate that HIV medications are only required in the Corrections Center, as per the RFP Scopes of Work. Please confirm that vendors are financially responsible to provide HIV medications only to the Corrections Center.

Vendors are financially responsible to provide HIV medications to the Corrections Center and JCMSC.

28. What is the average number of inmates receiving pharmaceutical treatment each month for the following conditions in the Correctional Center?

- a. Hepatitis C
SCDOC – 54.9 per month;
- b. HIV/AIDS
SCDOC – 42 per month;

29. What is the average number of inmates receiving pharmaceutical treatment each month for Hemophilia in all of the Shelby County facilities? **Jails** - 0 ; **SCDOC** – 0; **Juvenile Court** – 0

30. Please provide monthly statistical data for each of the following categories for each of the facilities.

- a. Number of inpatient offsite hospital days
Jails - 790; **SCDOC** – 1173; **Juvenile Court** – Not available
- b. Number of outpatient surgeries
Jails - 14; **SCDOC** – 18; **Juvenile Court** – less than 5 per year
- c. Number of outpatient referrals
Jails - 975; **SCDOC** – 2274; **Juvenile Court** – 96
- d. Number of trips to the emergency department
Jails - 239; **SCDOC** – 381; **Juvenile Court** – 8
- e. Number of ER referrals resulting in hospitalization
Jails – 26.5%; **SCDOC** – 23.2%; **Juvenile Court** – see attached.
- f. Number of ambulance transports
Jails - 83; **SCDOC** – 32; **Juvenile Court** – see attached

31. Please provide historical health services cost data broken out into at least the following categories for each of the facilities.
- a. Total offsite care – Not Available
 - b. Total pharmaceutical expenditures - Not Available
 - c. Laboratory services - Not Available
 - d. All on-site X-ray services for the Correctional Center and Juvenile
Not Available
 - e. Onsite TB and dental x-rays only for Jail and Jail East – TB X-rays are not an expense of the Vendor. 1,414 dental X-rays were performed by the current vendor at CJC in 2012, but no cost data is available. 305 dental X-rays were performed for Jail East inmates by the current vendor.

NOTE: For a. thru c. re: JCMSC, N/A. Services listed are TennCare covered services or are currently the responsibility of the County.

32. Under the new contract, who will be financially responsible for the following services for each facility: the County or the Contractor?
- a. Other outpatient referrals (besides inpatient hospitalization and outpatient surgeries)
N/A
 - b. ER visits
The County and/or TennCare (TennCare covered Juveniles)
 - c. Offsite diagnostics (lab/x-ray)
The County and/or TennCare (TennCare covered Juveniles)
33. Under the current contract, who is financially responsible for the following services for each of the facilities: the County or the incumbent Contractor? For a. thru f., either The Med, TennCare or private insurance.
- a. Inpatient hospitalization
 - b. Outpatient surgeries
 - c. Other outpatient referrals
 - d. ER visits – Vendor is responsible for 911 Ambulatory cost to transfer the inmate/detainee from site to ER, but The County (via The Med) and/or TennCare (for TennCare covered Juveniles) is responsible for the actual cost of services provided in the ER
 - e. Offsite diagnostics (lab/x-ray)
 - f. Pharmaceuticals – Vendor is responsible for all medications with the exception of TB and/or HIV meds provided by The SCHD or The MED.
34. RFP Section XI.C.3 - We understand that we will need to submit our pricing based on the multiple populations bands listed on page 75 of the RFP. After our review of *Exhibit I, Bid Form*, it appears that vendors will need to make multiple copies of the form and submit them separately for each required population band. Please confirm that this submittal method for pricing on *Exhibit I, Bid Form* is approved by the County. See addendum #3.
35. Please confirm that under the new contract, the Contractor will not be financially responsible for any of the following services. Vendor will not be financial responsible as long as the proper guidelines (NCCHC, ACA, DOJ, OSHA, TOSHA, State and Local standards) are followed and upheld regarding the medical care for inmates.
- a. Neonatal or newborn care after actual delivery
 - b. Cosmetic surgery, including breast reduction
 - c. Sex change surgery (including treatment or related cosmetic procedures)
 - d. Contraceptive care including elective vasectomy (or reversal of such) and tubal ligation (or reversal of such)
 - e. Extraordinary and/or experimental care

- f. Elective care (care which if not provided would not, in the opinion of the Medical Director, cause the inmate's health to deteriorate or cause definite and/or irreparable harm to the inmate's physical status)
 - g. Autopsies
 - h. Any organ (or other) transplant or related costs, including, but not limited to labs, testing, pharmaceuticals, pre- or post-op follow-up care, or ongoing care related to a transplant, etc.
 - i. Medications for the treatment of bleeding disorders, including, but not limited to Factor VIII and IX
36. Upon further review of *Exhibit I, Bid Form* (on RFP pg 80), it appears that our pricing for the Jail and Jail East will need to be submitted separately. In the RFP, the population bands for the Jail and Jail East are provided to vendors as a combined total population. Please confirm that vendors need to provide their pricing for the Jail and Jail East separately *See addendum #3.*
- a. If "yes", please provide separate population bands for the Jail and Jail East.
37. RFP Section XI.C.3 - On page 75 of the RFP, Exhibit II is referenced but it is not included in the documents provided by the County. Please provide Exhibit II to all proposers. *As stated in the RFP, Exhibit II is to be provided by the potential bidders.*
38. On page 80 of the RFP, *Exhibits I-A, I-B, I-C, I-D, and I-E* are referenced, yet they are not included in the documents provided by the County. Please provided these Exhibits to all proposers. *See addendum #3.*
39. RFP Section II.10; pg 5 - As per the RFP, we understand that all vendors must "apply and qualify for an Equal Opportunity Compliance (EOC) certification number through our EOC Administration. . . .". We contacted the number permitted in the RFP to confirm that we are complying with the EOC requirement and filling out the correct forms. We were informed by a County employee that as a new vendor, we should not fill out the exclusive EOC form, but instead fill out the Vendor Registration form. This will provide a Vendor Registration Number and an EOC Number. Please confirm that this is correct and acceptable by Shelby County for the purposes of this RFP. *Please go to Shelby County Governments home page at www.shelbycountyttn.gov. At the top of the home page, click on the links "Department," "P" for the Purchasing Department and "Conducting Business with Shelby County and Vendor Registration". Please complete the online application form.*
40. RFP Section II.13; pg 5 and RFP Section X.A.2.7; pg 68 - The RFP currently requests two (2) separate amounts for a Bid Bond, requiring "not less than five (5) percent of the amount of the bid" on Page 5, and \$50,000 on page 68. Please confirm the amount that Shelby County would like each vendor to submit for their Bid Bond with their proposal.. *Please submit a \$50,000.00 bid bond with your bid.*
41. RFP Section X.A.2.7; pg 68 – On page 68, it states that the Bid Bond or Cashier's Check "must accompany each proposal when submitted". Please confirm that the County wishes for only one Bid Bond or Cashier's Check from each vendor which will cover their entire proposal submission. *We require only one bid bond with your response.*
42. Please indicate the type and amount of performance guaranty provided by the incumbent health services contractor under the current contract. *\$ 1,000,000.00*
43. Please indicate the order of precedence among the solicitation documents (e.g., the RFP, initial responses to questions, subsequent responses to questions, exhibits and attachments, etc.) so that in case of contradictory information among these materials, bidders know which of the conflicting data sets to use to create their narratives and calculate their prices. *Please see our web site for all addendums and questions and answers.*

44. On page 2 of the RFP, the due date is stated as "Friday, January 31, 2013". Please confirm that the County wishes to receive proposals on Friday, February 1, 2013. See addendum #3.
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RFP Page	RFP Section Number/Name	Question
Done.	General Question	Are there network cable drops in facility areas where medical services are delivered that can be used by the Provider? If not, will Shelby County be responsible for installing network drops and associated infrastructure for administrative PC's or will this be the responsibility of the Provider including the installation costs? Shelby County has installed all of the network drops necessary for EMR at the Jail and SCDOC sites. Shelby County will assume the responsibility for network drops at JCMSC, as determined as necessary by SCHD.
	General Question	Do the detention facilities all have internet connectivity that the Provider can use to connect to its hosted computer systems and software solutions? Yes. If so, please specify the available bandwidth available to the internet at each facility. Ranges from 10 mb to 1 gb per second, all sites
Done.	General Question	Would the County allow the Provider to install its own network for use in providing health care, telemedicine or other administrative applications if necessary? No.
Done.	General Question	Are there existing computer workstations that will be made available to the new Provider? Yes. If so, would the County supply an inventory of the equipment including its type, age, and location? No.
Done	General Question	What Offender Management System is Shelby County currently using? Currently it is JMS for the Jails, and IMS for SCDOC. OMS (vender GTL, Inc.) will be the new system for Jails and SCDOC. Expected implementation to begin in summer of 2013. Juvenile Court is and will continue to use JCS. Please denote the vendor and current version.
Done.	General Question	Please provide a list of medical services areas that the County believes are missing computer workstations including exam, intake, triage, medical records, chronic care, etc. So that the bidders will have a count of workstations in all facilities that will be required for proper health care documentation should workstations not be provided. The County is making the commitment to provide all necessary workstations as determined by The County.
Done.	General Question	Please provide a list of the existing Telemedicine equipment in use by the County, if any, when it was replaced, and the equipment locations. N/A.

Done.	General Question	Is the County using an eMAR (Electronic Medication Administration Record) to track and administer medications at any of the County facilities? No . If so please denote the make and model of the eMAR.
Done.	General Question	Is it mandatory for the Provider to bid on all the facilities (Jail, Jail East, SCDOC, and JCMSC) No or, in the alternative, is it permissible for the Provider to exclude JCMSC from their bid? Yes
Done.	General Question	Please define the medication ordering process and inventory process at the County detention facilities. Vendor specific per policy and procedure
Done	General Question	What is the current length of hospital stay (1/12 to 12/12), broken down by month, and cost per month? Jails – Avg. length of stay for 2012 was 5.89 days, cost not available SCDOC - Avg. length of stay for 2012 was 8.5 days, cost not available JCMSC – Not available
Done	General Question	Over the past one (1) year how many suicide(s) have been attempted? Jail – 6 SCDOC – 0 JCMSC - 0
Done.	General Question	How many inmates over the past (12) months needed “off-site care”? Please list / detail. N/A -Vendor is not responsible for the costs of off-site patients.
Done	General Question	Are there specific times of day when sick call services are to be provided on the units for CIC, JCMSC, Jail East and SCDOC? If so, please provide the times and location. For CJC, Jail East and SCDOC, 5x per week ; 8-10 hours per day. For JCMSC, as needed, based on detainees needs.
Done.	General Question	Are all current medication carts the property of the County or are some carts the property of the current medical provider? Property of The County . If some of these carts are the property of the current vendor, please be specific in the <u>number and size</u> of medication carts the successful vendor will need to acquire for the start of the contract, and the locations these carts will be needed.
Done.	General Question	How do the staffing plans provided in the RFP compare to current staffing in each of the four (4) locations? Is this an increase in staffing for any of

		these locations? If yes, which positions have been increased? The staffing plan is to be determined by the potential vendor based on information provided. The vendor's proposed staffing may vary from staffing plan provided in the RFP but variance must be explained.
	General Question	<p>Please provide the Health Services Statistical Reports to include the following medical statistics if available by month and by site for 2010-2012 to date:</p> <ul style="list-style-type: none"> • Average Daily Population – As stated in the RFP, 201 Poplar - approx. 2,285 Jail East - approx. 274 SCDOC- approx. 2,495 JCMSC – approx. 39 • Number of Inpatient Admissions and Inpatient Days, dates of service, diagnosis, billed and paid amounts. No Vendor Costs • Outpatient related services by procedure description, dates of service, and paid amount (i.e. CT, MRI, arthroscopy, endoscopy, orthopedic-related, etc.) No Vendor Costs • Number of ambulance trips and emergency room visits, billed and paid amounts, and whether ED trip resulted in inpatient admission <u>ER Ambulance Trips</u> Jails – 67 SCDOC – 32 JCMSC – 8 <u>Non- Emergency Ambulance Trips to ER</u> Jails – 172 SCDOC – 338 JCMSC – 231 • On site services and related costs: <ul style="list-style-type: none"> ○ X-rays performed onsite SCDOC – 188 Jail/Jail East – all provided at The Med JCMSC – N/A ○ Onsite lab services – N/A ○ Dialysis treatments (if applicable) - N/A ○ Ultrasounds performed onsite - N/A
Done.		Please provide total onsite and off-site medical costs by year for 2010-2012 by site. Not provided.

	General Question	<p>What is the average length of stay per location?</p> <p>201 Poplar – 17.6 days Jail East (Women)– 6.3 days Jail East (Juveniles) – 75 days SCDOC – 3 years JCMSC – 15 days</p>
Done	General Question	<p>At SCDOC, are the inmates required to travel to the main building for meal times? Yes If so, are medication administration and sick call coordinated with the meals? Yes . Currently, do inmates receive their medications while in the main building for feedings? Yes .If so, are there exceptions to this practice? Yes, if they are in Medical Housing or sick in their cell, meds will be taken to the cell.</p>
5 and 68	Section II, Item 13 on Pg. 5 and Section X, Item 7 on pg. 68	<p>Please clarify the amount of the bid bond: 5% of the amount of the bid or \$50,000. \$ 50,000.00</p>
9	Section VI , Item h	<p>Is the intent of this section that the vendor subcontract with LOSB's for components of the RFP, or will the County separately be accepting bids for specialty services provided by LOSB's? Vendors are to subcontract with LOSB vendors.</p>
15 Done.	Section VII	<p>Please describe how the medications are managed for the 40-60 inmates who report weekly. Weekenders go to the main building for pill pass.</p>
16	Section VII	<p>Does each campus/location currently operate a medical housing unit? 201 Poplar and SCDOC – yes; Jail East – No; JCMSC – No If not, where are inmates that require increased nursing/medical monitoring housed at each location? CJC, Jail East and SCDOC - The Med Prison Ward JCMSC – LeBonheur or The Med</p>
20	Section IX, B – General Specifications, Item 1.b	<p>Does the vendor incur any costs associated with background checks for potential employees? Jails, SCDOC and JCMSC– No, all background checks done by The County</p>
20	Section IX, B – General Specifications, Item 1.d	<p>Does the County have a medical partner provider for the care of the HIV positive population, or is this handled directly on site by the current medical care provider? Our medical partner provider is The Regional Med & Adult Special Care for the Jails and SCDOC. JCMSC's medical partner is St. Jude. Is the program structured to access 340B pricing? Yes. What is the average HIV affected population in</p>

		<p>treatment?</p> <p>CJC – 24</p> <p>Jail East - 4</p> <p>SCDOC – 42</p> <p>JCMSC – Not available</p>
20 Done	Section IX, B – General Specifications, Item 1.c	<p>What groups are currently being offered by the mental health counselors at SCDOC? Including, but not limited to, Anger Management, MRT (moral reconnection treatment), Sex Offender group, AA, Living Skills group, Bible Study, Parenthood, and GED classes.</p>
20 Done	Section IX, B – General Specifications, Item 1.c Item 1.c	<p>What is the procedure in place for inmates identified as acutely mentally ill and in need of inpatient psychiatric services? Vendor specific according to ACA, NCCHC standards and DOJ settlement agreements and the policy & procedures for all facilities.</p>
24 Done	Section IX, B – General Specifications, 4. Schedules	<p>Please provide 2012 agency usage of RN's, LPN's, and MA's. N/A</p>
30 Done	Section IX, C – Scope of Work, Item 3	<p>Will the health care Provider receive the medical complaints/grievances directly from custody or from the inmate patients? Directly from Custody</p>
30-31 Done	Section IX, C – Scope of Work, Item 5	<p>Who is the current primary hospital provider? For Jails, SCDOC and JCMSC - The Regional Med. JCMSC also uses LeBonheur. Does the County or current medical care Provider operate a medical housing unit? No.</p>
31 Done	Section IX, C – Scope of Work, Item 6	<p>Does the County have a comprehensive specialty service network, or does the County desire the prospective vendor to develop such a network? No, that is currently the responsibility of The Regional Med.</p>
32 Done	Section IX, C – Scope of Work - Staffing Requirements / Performance Indicators For The Shelby County Jail And Jail East	<p>What software version of the NextGEN EMR is being utilized in Shelby County? NextGen Version 5.6 UDS</p>
32 Done	Section IX, C – Scope of Work - Staffing Requirements / Performance Indicators For The Shelby County Jail And Jail East	<p>What software version of NextGEN's KBM is installed with the NextGEN EMR? KBM is 7.9</p>
32 Done	Section IX, C – Scope of Work - Staffing Requirements / Performance Indicators For The Shelby County Jail And Jail East	<p>What existing 3rd party providers or systems are interfaced with the NextGEN EMR? This should include LAB, Radiology, and Pharmacy vendors and systems. What interface method/format/protocol is</p>

		<p>being used for these interfaces?</p> <p>Lab Services: BioReference moving towards LabCorp</p> <p>Radiology Services: Radiographics on a PRN basis</p>
32 Done	Section IX, C – Scope of Work - Staffing Requirements / Performance Indicators For The Shelby County Jail And Jail East	Is the County's Offender Management System using a standard HL-7 interface to the NextGEN EMR of integration of inmate data? If not please define interface method. IMS/JMS – flat file
32 Done	Section IX, C – Scope of Work - Staffing Requirements / Performance Indicators For The Shelby County Jail And Jail East	Who is currently maintaining the NextGEN EMR? Shelby County Government (Shelby County Health Department, Sheriff's Office, Corrections, SCIT), and SergeMD Would the Provider be responsible for maintaining the system? No. If so, please define the annual maintenance amount for this solution. Not to be provided by the Vendor.
32 Done	Section IX, C – Scope of Work - Item 8	<p>Who are the current on-site diagnostics vendors? What services (and how many of each service either monthly or yearly) are provided by the current comprehensive medical care vendor, either directly or through subcontractors? Information regarding current Inmate Healthcare Vendor – cannot be provided as they are a potential participant in RFP# 13-012-31 for inmate medical services for Shelby County Government Inmate Medical Services.</p> <p>Services provided by SergeMD regarding the Shelby County Government NextGen EMR include the following: (See Attachment)</p>
32	Section IX, C – Scope of Work - Item 9	<p>Who is the current dental care Provider? Vendor Responsibility. What is the approximate number of visits either monthly or yearly?</p> <p>CJC – 4,601 annually Jail East – 420 annually SCDOC - 1,492 annually JCMSC – Not available</p>
32 Done	Section IX, C – Scope of Work – Item 11	Please provide a list of medications used by NDC, Drug name, total units, and total cost for the last twelve months? Responsibility of current vendor, Vendor specific and determined

32 Done	Section IX, C – Scope of Work – Item 11	How many patients and total spend do you have for HEP C and Psych each year? 201 Poplar – (HEP C)22 per month ; (Psych) 392.5 per month Jail East - (HEP C) 3 per month ; (Psych) 116 per month SCDOC - (HEP C) 54.9 per month ; (Psych) 532 per month; JCMSC – Not Available
32 Done	Section IX, C – Scope of Work – Item 11	What is your total Pharmacy spend (excluding HIV and TB) for the past twelve months? Vendor Specific, not available
32 Done	Section IX, C – Scope of Work – Item 11	Please provide a breakdown of the primary source (patient specific or stock) of medication distribution by location? All medications are patient specific however, stock medications are also used.
33 Done	Section IX, C – Scope of Work – Item 11	Does the Provider incur penalties if the MED pharmacy or Health Department provides necessary patient medication past the 24 hour window for compliance? No.
34 Done	Section IX, C – Scope of Work – Item 16	How many instances of therapeutic restraints have occurred in 2012? How many episodes of correctional initiated restraint use have occurred in 2012? NONE
40	Section IX, D – Scope of Work – Item 2	Please provide the inmate rate of release between booking and the first seven days inmates are at the facility. Jails – 71%; SCDOC - 0 JCMSC – Not Available at this point
43 Done	Section IX, D – Scope of Work – Item 9.c	The sentence proceeding letter “c” states”...arranging or providing for Emergency dental needs.” However section “c” states “dental hygiene”. Please describe what is meant by “dental hygiene”? According to NCCHC, ACA and DOJ standards and specifications.
45 Done	Section IX, D – Scope of Work – Item 17	What is the number of detainees on psychotropic medications at each site? 201 Poplar – 19.8% Jail East – 48% SCDOC – 532 per month JCMSC – Not available
48 Done	Section IX, D – Scope of Work – Item 5.11 (Performance Indicators)	How many cases of pregnant opioid addicted inmates per month are being treated with a Methadone provider? Jail East- 0
54 Done	Section IX, E – Scope of Work, Item 15	Are there any current mental health programs/groups offered to the juveniles? None. If so, what are they?
55	Section IX, E – Scope of Work,	What is the average number of detainees on suicide

	Item 15 c	watch in any given week? JCMSC – Less than 3
55	Section IX, E – Scope of Work, Item 15 d	What is the average number of detainees placed on direct observation in any given month? JCMSC – Less than 3 per year.
57	Section IX, E – Scope of Work, Staffing Requirements – JCMSC	Does the minimum staffing requirement include a psychologist and a psychiatrist or will master's level QMHP(s) and a psychiatrist meet the requirements? There must be coverage by a psychiatrist for a minimum of .25 FTE. A psychologist or other certified mental health counselor may be staffed to complement the psychiatrist.
57	Section IX, E – Scope of Work, Staffing Requirements – JCMSC	The minimum staffing program must include 24/7/365 coverage. Can this be a combination of on-site and on-call coverage or does a QMHP have to be on-site 24/7/365? There must be licensed nursing staff presence 24/7/365 in conjunction with on-call medical staff at selected hours.
63 Done	Section X, Item 18	Please provide a copy of the County Travel Policy and Procedure. We donot have a travel policy for vendors.
75 Done	Section 3 under "Supplemental Information – Proposed Compensation FTE's"	The second paragraph states "Current staff compensation will be made available upon request." Could you please forward a copy of the current staffing compensation rate, all benefit rates associated with each position? This should not have been stated. The prospective vendor is expected to be able to determine market rates for labor for the services requested.
80 Done		The RFP indicates Exhibits I-A to I-E as being available. Please provide a copy of the exhibits. See Addendum #3

NOTE: Questions are in black & answers are in red.